Asbestos Disclosure for Demolition Project	
Date:	
Applicant Name:	
Applicant Address:	
Applicant telephone Number:	
Job Address:	
Unincorporated Area of Orange Cou	inty Zip Code
Demolition Permit Application Number:	
I declare that the demolition of the structure which job address is listed above does not involve demolition or removal of any asbestos material. Written asbestos notification is not applicable to the demolition project. I declare that the demolition of the of the structure which job address is listed above does involve demolition or removal of asbestos material, and attached is a copy of each written asbestos notification regarding the building that has been required to be submitted to the U.S. Environmental Protection Agency.	
Signature of Authorized Agent or Owner:	
County Of Orange	400000000000000000000000000000000000000
Planning and Development Services Department	ASBESTOS DISCLOSURE
Central Office Inspection Office P.O. Box 4048 22921 Triton Way 300 N. Flower Laguna Hills, CA 92653	for

Santa Ana, CA 92702 (714) 834-2626

Laguna Hills, CA 92653 (949) 472-7979

DEMOLITION PROJECT